

09/806439

ISSUE SLIP STAPLE AREA (for additional crosses/reclaims)

POSITION	INITIALS	ID. NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			

INDEX OF CLAIMS

<input checked="" type="checkbox"/>	Rejected	N	Non-elected
<input type="checkbox"/>	Allowed	I	Interference
<input type="checkbox"/>	(Through numeral) Canceled	A	Appeal
<input type="checkbox"/>	Restricted	O	Objected

Claim	Final	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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